

****GVM Certificate Template****

****[Institution Name]****

****[Institution Address]****

****[City, State, Zip Code]****

****[Phone Number]****

****[Email Address]****

****[Website URL]****

****GVM Certification of [Program Name]****

****Certificate No:** [Certificate Number]**

****Issue Date:** [Date]**

This is to certify that

****[Student Name]****

****[Student ID or Enrollment Number]****

has successfully completed the requirements for the

****[Program/ Course Title]****

in the field of ****[Field of Study]****.

The program was conducted from ****[Start Date]**** to ****[End Date]****

and encompassed a total of ****[Number of Hours]**** hours of instruction.

The undersigned certifies that this certificate has been issued in accordance with the guidelines of the Graduate Vocational Management (GVM).

****[Signature]****

****[Name of Authorized Person]****

****[Title/Position]****

****[Date Signed]****

****[Institution Seal]****

****Note:**** This certificate is valid for a period of [Validity Period, if applicable].